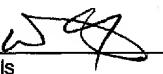
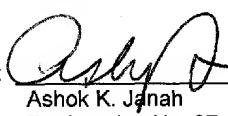


**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of: GRIMBERGEN et al.	Group No: 1763
Application No: 09/595,778	Examiner: Allan W. Olsen
Confirmation No: 6490	Attorney Docket No.: AMAT/2077.D1
Filed: June 16, 2000	
Title: APPARATUS AND METHOD FOR MONITORING PROCESSING OF A SUBSTRATE	June 19, 2008 San Francisco, CA 94107

Commissioner for Patents PO Box 1450 Alexandria, VA 22313-1450 <b>VIA EFS</b>	<b>Extension of Time</b>		
<input checked="" type="checkbox"/> Applicant petitions for an extension of time under 37 C.F.R. 1.136			
<b>Papers Enclosed</b>  <input checked="" type="checkbox"/> Amendment <input checked="" type="checkbox"/> Request for Continued Examination <input type="checkbox"/> Drawings <input type="checkbox"/> Supplemental Information Disclosure Statement <input type="checkbox"/> PTO-1449 Form <input type="checkbox"/> Citations <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Postcard for Return	<b>Extension (Months)</b>	<b>Extension Fee</b>	
		<input checked="" type="checkbox"/> One Month      \$120.00      \$60.00 <input type="checkbox"/> Two Months      \$460.00      \$230.00 <input type="checkbox"/> Three Months      \$1,050.00      \$525.00	
		<b>Total \$ 120.00</b>	
	<input type="checkbox"/> Applicant believes that no extension of term is required. However, this conditional petition is being made in case applicant has inadvertently overlooked the need for a petition for extension of time.		

<b>Fees for Extra Claims</b>						
	Claims remaining after amendment	Highest number previously paid for	Number Extra	<b>Rate</b>		<b>Additional Fee</b>
				Large Entity	Small Entity	
Total Claims (20)	26	89		\$50.00	\$25.00	\$0.00
Independent Claims (3)	3	12		\$210.00	\$105.00	\$0.00
Multiple Dependent Claims				\$370.00	\$185.00	\$0.00
Supplemental Information Disclosure Statement						
						<b>Total</b>
						<b>\$0.00</b>

<b>Fee Payment</b>	<b>Fee Deficiency</b>
Extension Fees      \$120.00	<input type="checkbox"/> If any additional extension and/or fee is required, please charge Deposit Account No. <u>10-0258</u> . and/or <input type="checkbox"/> If any additional fee for claims is required, please charge Deposit Account No. <u>10-0258</u> .
Fee for RCE      \$810.00	
<b>Total</b> <b>\$930.00</b>	
<input type="checkbox"/> Attached is check no. _____ in the sum of <u>\$0.00</u> . <input checked="" type="checkbox"/> Please charge Deposit Account No. <u>10-0258</u> in the sum of <u><b>\$930.00</b></u> .	
<b>CERTIFICATE OF TRANSMISSION</b> (37 C.F.R. § 1.8a):  I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, facsimile transmitted to the U.S. Patent and Trademark Office at (571) 273-8300, or electronically filed, on the date shown below.	
By:  Amy Wells      Date: <u>June 19, 2008</u>	
Please direct telephone calls to: Ashok K. Janah at: (415) 538-1555 Please continue to send correspondence to: <b>Janah &amp; Associates, PC</b> 650 Delancey Street, Suite 106. San Francisco, CA 94107.	
Respectfully Submitted,  By: <u>Ashok K. Janah</u> Date: <u>June 19, 2008</u> Registration No. 37,487	